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## UTILITY

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Attorney Docket No.	35.G2856	
First Named	d Inventor or Application Identifier	
TOSHIHIKO OUCHI ET AL	·	
Everson Mail Lobel No.		

PATENT APPLICATION	First Named Inventor or Application Identifier				
TRANSMITTAL	TOSHIHIKO OUCHI ET AL.				
wOnly for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content	Commissioner for Patents Box Patent Application Washington, DC 20231				
1. Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
2. Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. X Specification Total Pages 42	a. Computer Readable Form (CRF)				
4. X Drawing(s) (35 USC 113) Total Sheets 16	b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or				
5. X Oath or Declaration Total Pages 2	ii. paper				
a. X Newly executed (original or copy)	c. Statements verifying identity of above copies				
b. Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 17 completed					
(for continuation/divisional with Box 17 completed					
i. <u>DELETION OF INVENTOR(S)</u> Signed Statement attached deleting	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney				
inventor(s) named in the prior application 37 CFR 1.63(d)(2) and 1.33(b).	n, see 11. English Translation Document (if applicable)				
6. X Application Data Sheet. See 37 CFR 1.76	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
Typhodion bala onlock book of Office 1.10	Statement (IDS)/PTO-1449 Citations  13. Preliminary Amendment				
	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
	15. Certified Copy of Priority Document(s)				
	16 (if foreign priority is claimed)  16 Other:				
<u></u>					
77. If a CONTINUING APPLICATION, check appropriate box and	supply the requisite information:				
Continuation  Divisional  Continuation-in-part (CIP) of prior application No/  Prior application information:  Examiner  Continuation-in-part (CIP) of prior application No/  Group/Art Unit:					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
18. CORRESPONDENCE ADDRESS					
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below					
NAME					
Address					
City State	Zip Code				
Country Telephone	Fax				

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RA	ATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	43-20 =	23	X \$ 18.00	=	\$414.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	5-3 =	2	X \$ 80.00	=	\$160.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$270.00 =			=	\$000.00	
			6 C, 10C, 26		SIC FEE FR 1.16(a))	\$710.00
	*		Total of	above Calcu	ılations =	\$1284.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9, 1	.27, 1.28).		
National Trans	TOTAL =			\$1284.00		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Elizabeth F. Holowacz			
SIGNATURE	Ctrabeth Holoward 42,667			
DATE	July 12, 2001			

EFH:meg

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